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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY, TRENTON DIVISION		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	Write	e the name that is on	John		Jennifer
	pictu	government-issued ire identification (for nple, your driver's	First name	•	First name
	licen	se or passport).	Middle name	-	Middle name
	Bring	g your picture	Reynolds		Reynolds
	with	the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
		de your married or len names.			
3.	you num Indi	the last 4 digits of Social Security ber or federal vidual Taxpayer tification number	xxx-xx-4769		xxx-xx-1388

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Debtor 1 Debtor 2

Reynolds, John & Reynolds, Jennifer

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	I have not used any business name or EINs. Business name(s)
		EINs	EINs
5.	Where you live	221 Howell Ave	If Debtor 2 lives at a different address:
		Spring Lake, NJ 07762-1708 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Monmouth County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other	Check one: Over the last 180 days before filing this petition, I have
		district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Debtor 2

Reynolds, John & Reynolds, Jennifer

7.	The chapter of the Bankruptcy Code you are			rief description of each, see <i>No</i> ne top of page 1 and check the			. § 342(b) for Individual	s Filing for Bankruptcy (Form		
	choosing to file under	☐ Cha								
		■ Cha	pter 11							
		☐ Cha	pter 12							
		☐ Cha	pter 13							
8.	How you will pay the fee	— al If	bout how you your attorne	Il pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details ut how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. bur attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a printed address.						
			need to pay	the fee in installments. If yo		this option, sign a	and attach the Application	on for Individuals to Pay The		
		□ I	Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application							
			Have the C	Chapter 7 Filing Fee Waived (C	fficial For	m 103B) and file	it with your petition.			
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.								
			District	New Jersey (Trenton) Jennifer Reynolds	When	9/03/14	Case number	14-28210		
			District		When		Case number			
			District	_	_ When		Case number			
10.	Are any bankruptcy cases pending or being filed by	■ No								
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.								
			Debtor				Relationship to y	ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y			
			District		_ When		Case number, if	known		
11.	Do you rent your residence?	■ No.	Go to li	ine 12.						
	residence.	☐ Yes.	Has yo	ur landlord obtained an eviction	on judgme	ent against you?				
				No. Go to line 12.						

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Debtor	1	
Dobtor	2	

Reynolds, John & Reynolds, Jennifer

Par	t 3: Report About Any Bus	sinesses \	ou Own	as a Sole Proprieto	or .			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Stat	e & ZIP Code			
	to this petition.		Check	k the appropriate box	to describe your business:			
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set apprint deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procup. S.C. 1116(1)(B).					
	For a definition of small	☐ No.	I am not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	ess debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the define						
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	to pose a threat of Yes. nt and identifiable What is the haz		the hazard?				
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
	-				Number, Street, City, State & Zip Code			

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Debtor 1 Debtor 2

Reynolds, John & Reynolds, Jennifer

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Debtor 2

Reynolds, John & Reynolds, Jennifer

Par	Answer These Question	ons for Re	porting Purposes							
16.	What kind of debts do you have?	16a.		nsumer debts? Consumer deb nal, family, or household purpose		n 11 U.S.C.§ 101(8) as "incurred by an				
			☐ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you ow	e that are not consumer debts o	r business debts	s				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	7. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	☐ Yes.		o you estimate that after any exe e to distribute to unsecured cred		excluded and administrative expenses are				
	administrative expenses		□ No							
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes							
18.	How many Creditors do	1 -49		□ 1,000-5,000		☐ 25,001-50,000				
	you estimate that you owe?	□ 50-99		<u> </u>		<u> </u>				
		☐ 100-19		☐ 10,001-25,000		☐ More than100,000				
19.	How much do you	□ \$0 - \$	50,000	■ \$1,000,001 - \$10 mill	ion	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 m	illion	□ \$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 n □ \$100,000,001 - \$500		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	50,000	■ \$1,000,001 - \$10 mill	ion	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 m		☐ \$1,000,000,001 - \$10 billion				
			001 - \$500,000	□ \$50,000,001 - \$100 n		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
		□ \$500,001 - \$1 million		□ \$100,000,001 - \$500	million	More than \$50 billion				
Par	t 7: Sign Below									
For	you	I have exa	amined this petition, and I declar	re under penalty of perjury that the	he information p	provided is true and correct.				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
			ney represents me and I did not ined and read the notice require		ho is not an atto	orney to help me fill out this document, I				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankrupt case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ John Reynolds								
		John R	eynolds of Debtor 1	Jennif	er Reynolds re of Debtor 2					
		Executed	on March 18, 2018 MM / DD / YYYY	Execute		18, 2018 D/YYYY				

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Debtor 1 Debtor 2

Reynolds, John & Reynolds, Jennifer

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Timothy P. Neumann Esq	Date	March 18, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Timothy P. Neumann Esq		
Printed name		
Broege, Neumann, Fischer & Shaver LLC		
Firm name		
25 Abe Voorhees Dr		
Manasquan, NJ 08736-3560		
Number, Street, City, State & ZIP Code		
Contact phone (732) 223-8484x210	Email address	tneumann@bnfsbankruptcy.com
TN 6429		
Bar number & State		

Certificate Number: 01141-NJ-CC-030378542



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>January 3, 2018</u>, at <u>11:57</u> o'clock <u>AM EST</u>, <u>John M Reynolds Sr.</u> received from <u>American Consumer Credit Counseling</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>District of New Jersey</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 3, 2018 By: /s/Jennifer Papa

Name: Jennifer Papa

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 15317-NJ-CC-030732797



CERTIFICATE OF COUNSELING

I CERTIFY that on March 16, 2018, at 9:29 o'clock PM PDT, Jennifer C Reynolds received from Access Counseling, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of New Jersey, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 16, 2018

By: /s/Mariel Macrohon

Name: Mariel Macrohon

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

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Fill in this in	formation to identify your case			
Debtor 1	John Reynolds			
Dobtor 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Jennifer Reynolds First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the: DI	STRICT OF N	NEW JERSEY, TRENTON DIVISION	
Case numbe	r			
(if known)				☐ Check if this is an amended filing
				amended liling
B 104				
	 ividual Chaptor 11	Casas	List of Croditors Who Hay	vo the 20 Largest
	•		List of Creditors Who Hav	g
Unsecu	ired Claims Agains	st You a	and Are Not Insiders	12/
value places Be as compleinformation.	the creditor among the holders	of the 20 larg	by secured creditors unless the unsecured cla gest unsecured claims. Deople are filing together, both are equally res rgest to Smallest. Do Not Include Claims by I	sponsible for supplying correct
rait i.	st the 20 onsecured Claims in O	rder Irom La	rgest to Smallest. Do Not include Claims by I	
				Unsecured claim
1	arma D Candra K Julah	What	is the nature of the claim?	\$ \$980,356.19
	orge P Sandra K Irish hard E. Brodksy	As of	the date you file, the claim is: Check all that a	apply
400	00 Ponce de Leon Blvd Ste		Contingent	
470			Unliquidated Disputed	
Col	ral Gables, FL 33146-1432		None of the above apply	
		Does	the creditor have a lien on your property?	
		=	, , , ,	
Cont	not .	— <u>-</u>	No Yes. Total claim (secured and unsecured)	\$
Com	dCl	ш	Value of security:	- \$
Cont	act phone		Unsecured claim	\$
2		What	is the nature of the claim?	° ¢4 444 02
2 Mic	lland Funding, LLC	vviiai	is the nature of the claim?	\$ <u>\$1,411.03</u>
	75 Aero Dr Ste 200		the date you file, the claim is: Check all that a	pply
Saı	n Diego, CA 92123-2255		Contingent	
			Unliquidated Disputed	
			None of the above apply	
		Does	the creditor have a lien on your property?	
		Does ■		
Cont	act	— -	No Yes. Total claim (secured and unsecured)	\$
Cont	aul	Ц	Value of security:	ψ

B104 (Official Form 104)

Contact phone

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

Unsecured claim

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otor 1 otor 2	Reynolds, John & Reynolds	s, Jennifer	Case number (if known)		
		What i	s the nature of the claim?		\$ \$111,642.38
	te of New jersey	A a a f 4	he data van file the claim is. Chask all that or		
	of Taxation Bk Se P O		he date you file, the claim is: Check all that ap Contingent	ppiy	
	Box 245 Box 245		Unliquidated		
Tre	nton, NJ 08602-0245	_	Disputed		
			•		
		•	None of the above apply		
		Does t	he creditor have a lien on your property?		
			No		
Conta	act		Yes. Total claim (secured and unsecured)	\$	
			Value of security:	- \$	
Conta	act phone	_	Unsecured claim	\$	
		What i	s the nature of the claim?		\$_\$70,291.63
Sta	te of New jersey				
	of Taxation Bk Se P O		he date you file, the claim is: Check all that ap	ppiy	
	Box 245 Box 245		Contingent		
Tre	nton, NJ 08602-0245	□	Unliquidated		
			Disputed		
			None of the above apply		
		Does t	he creditor have a lien on your property?		
			No		
Conta	act		Yes. Total claim (secured and unsecured)	\$	
		_	Value of security:	- \$	
Conta	act phone		Unsecured claim	\$	
		What i	s the nature of the claim?		\$ \$12,500.00
Sta	te of New jersey				<u> </u>
Div	of Taxation Bk Se P O		he date you file, the claim is: Check all that ap	ply	
PO	Box 245 Box 245		Contingent		
Tre	nton, NJ 08602-0245		Unliquidated		
			Disputed		
			None of the above apply		
		Does t	he creditor have a lien on your property?		
			No		
Conta	act		Yes. Total claim (secured and unsecured)	\$	
Conte			Value of security:	-\$	
Conta	act phone		Unsecured claim	\$	
	Danis N. A	What i	s the nature of the claim?		\$ <u>\$148,029.14</u>
	Bank, N.A.	A	he date you file the claim is: Check all that a	nh.	
	n Operations	_	he date you file, the claim is: Check all that ap Contingent	ppiy	
	Chestnut St		•		
Lev	viston, ME 04240-7744		Unliquidated		
			Disputed		
			None of the above apply		
		Does t	he creditor have a lien on your property?		

B 104 (Official Form 104)

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ebto	Daymalda laba 0 Daymald	s, Jennife	Case number (if known,	
	Contact Contact phone	_ = _	No Yes. Total claim (secured and unsecured) Value of security: Unsecured claim	\$ - \$ \$
	TD Donk N A	What	is the nature of the claim?	\$_\$121,412.09
_	TD Bank, N.A. Loan Operations	As of	the date you file, the claim is: Check all that a	vlaq
	32 Chestnut St		Contingent	FF-7
	Lewiston, ME 04240-7744		Unliquidated	
	20W10t011, III2 04240 1744		Disputed	
			None of the above apply	
		Does	the creditor have a lien on your property?	
			No	
	Contact		Yes. Total claim (secured and unsecured)	\$
			Value of security:	- \$
	Contact phone		Unsecured claim	\$
art 2	2: Sign Below			
		nformation p	provided in this form is true and correct.	
,	/s/ John Reynolds		X /s/ Jennifer Reynolds	
	John Reynolds		Jennifer Reynolds	
	Signature of Debtor 1		Signature of Debtor 2	
-	Date March 18, 2018		Date March 18, 2018	

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			Docur	ment	Page 13 of 17			
Fill	in this informa	tion to identify your	case:					
Del	otor 1	John Reynolds						
D-1	-4 0	First Name	Middle Name		Last Name			
	otor 2 ouse if, filing)	Jennifer Reynolo First Name	Middle Name		Last Name			
Uni	ted States Bank	cruptcy Court for the:	DISTRICT OF NEW	JERSEY, T	RENTON DIVISION			
Cas	se number							
	nown)							ck if this is an nded filing
Of	ficial For	m 106Sum						
Su	mmary of	Your Assets	and Liabilities	and Ce	rtain Statistical Ir	nformation		12/15
info you	rmation. Fill our original forms	nt all of your schedule s, you must fill out a r	es first; then complete	the informa	together, both are equally ation on this form. If you a at the top of this page.			
Par	t 1: Summar	rize Your Assets						
								assets of what you own
1.		3: Property (Official Fo					\$	4,750,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A	/B			\$	0.00
	1c. Copy line	63, Total of all property	y on Schedule A/B				\$	4,750,000.00
Par	t 2: Summar	rize Your Liabilities						
							Vour	liabilities
								nt you owe
2.	Schedule D: C	Creditors Who Have Cl	aims Secured by Prope	rty (Official F	Form 106D)			
					of the last page of Part 1 of	Schedule D	\$	3,302,883.62
3.			Unsecured Claims (Office 1)		6E/F) ne 6e & chedule E/F		\$	0.00
	.,		" ,	,	m line 6j s chedule E/F		 \$	3,834,901.85
	ob. Copy the	total olaims from Fair	2 (nonphonty unscource	a diairio, ire	in the of worldade Err		<u> </u>	3,034,901.03
					Yo	ur total liabilities	\$	7,137,785.47
Par	t 3: Summar	rize Your Income and	Expenses					
4.		our Income(Official Formbined monthly incom		le I			\$	0.00
5.		our Expenses (Official of the control of the contro					\$	0.00
Par			Administrative and St					
6.			er Chapters 7, 11, or 13		ov and authorit this faces to the	o court with	nor only	udoo
	∐ No. You	nave notning to report o	on this part of the form. (oneck this b	ox and submit this form to th	e court with your ot	ner sched	uies.
7.	YesWhat kind of	debt do you have?						

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Dobtor 1	Document	Page 14 of 17	
Debtor 1 Debtor 2	Reynolds, John & Reynolds, Jennifer	Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$ 0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Coastal Capital Partners LLC RR 71 Spring Lake, NJ 07762

Fein Such Kahn & Shepard 7 Century Dr Ste 201 Parsippany, NJ 07054-4609

George P Sandra K Irish Richard E. Brodksy 4000 Ponce de Leon Blvd Ste 470 Coral Gables, FL 33146-1432

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

J P Morgan Acquistion Corp 383 Madison Ave Fl 8 New York, NY 10179-0001

John Cunningham 205 Worthington Ave Spring Lake, NJ 07762-1643

Midland Funding, LLC 8875 Aero Dr Ste 200 San Diego, CA 92123-2255 NEW Stream Secured Capital LP John Cunningham Assingee 205 Worthington Ave Spring Lake, NJ 07762-1643

NJ Attorney General Division of Law Richard J Hughes Justice 25 Market St Trenton, NJ 08611-2148

Ostrowitz & Ostrowitz Attorneys for TD Bank 225 Gordons Corner Rd Ste 1-J Manalapan, NJ 07726-3356

Pressler and Pressler for Midland Funding #Y21223 7 Entin Rd Parsippany, NJ 07054-5020

Shapiro & DeNardo, LLC Attys for J P Morgan Mtg Acquistion 14000 Commerce Pkwy Ste B Mount Laurel, NJ 08054-2242

State of New Jersey
Department of the Treasury Division of T
PO Box 283
Trenton, NJ 08646-0283

State of New jersey
Div of Taxation Bk Se P O
PO Box 245 Box 245
Trenton, NJ 08602-0245

TD Bank, N.A. Loan Operations 32 Chestnut St Lewiston, ME 04240-7744

The Bancorp Bank 1818 Market St Fl 28 Philadelphia, PA 19103-3629

The Lamm Group 1608 Walnut St Ste 703 Philadelphia, PA 19103-5447

US attorney General Peter Rodino Fed Bld 970 Broad St Ste 700 Newark, NJ 07102-2534

Vincent Gifford Kromer Law Firm LL 208 Main St Ste 201 Asbury Park, NJ 07712-7033